



0512-1004  
PATENTS

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of

Evelyne DELFOURNE et al.

Serial No. 10/049,381

Filed February 12, 2002

Confirmation No. 3819

GROUP 1626

Examiner J. Coppins

PHENANTHROLINE-7-ONE DERIVATIVES  
AND THEIR THERAPEUTIC APPLICATIONS

AMENDMENT

Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313

July 19, 2005

Sir:

Responsive to the Official Action mailed April 19,  
2005, please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing  
of claims which begins on page 2 of this paper.

**Remarks** begin on page 25 of this paper.

07/29/2005 WMA22 00000001 250120 10049381

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1626  
SW  
For purposes  
Only

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2001

Application or Docket Number

10/049381

**CLAIMS AS FILED - PART I**

SMALL ENTITY  
TYPE ☐

OR  
OTHER THAN  
SMALL ENTITY

	(Column 1)	(Column 2)
TOTAL CLAIMS		
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	14 minus 20 = *	
INDEPENDENT CLAIMS	6 minus 3 = *	
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

RATE	FEE
BASIC FEE	370.00
X\$ 9=	
X42=	
+140=	
TOTAL	

RATE	FEE
BASIC FEE	740.00
X\$18=	
X84=	
+280=	
TOTAL	

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

SMALL ENTITY

OR  
OTHER THAN  
SMALL ENTITY

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	12 Minus ** 20 = -		
Independent	6 Minus *** 6 = -		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

RATE	ADDI-TIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDI-TIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

3-14-05

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	13 Minus ** 20 = -		
Independent	6 Minus *** 6 = -		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

RATE	ADDI-TIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDI-TIONAL FEE
X\$18=	
X84=	
+280=	
TOTAL ADDIT. FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	15 Minus ** 20 = -		
Independent	8 Minus *** 6 = 2		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			<input type="checkbox"/>

RATE	ADDI-TIONAL FEE
X\$ 9=	
X42=	
+140=	
TOTAL ADDIT. FEE	

RATE	ADDI-TIONAL FEE
X\$18=	
X200= \$200.00	
+280=	
TOTAL ADDIT. FEE	\$200.00

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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